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Bib Data Sheet

CONFIRMATION NO. 1857

|                                                                                                                                                                                                                                                                                                   |                                                                                                                   |                                   |                                                                                                                                                                                                                                                                                 |                                            |                                |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|-----------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|--------------------------------|
| <b>SERIAL NUMBER</b><br>09/760,028                                                                                                                                                                                                                                                                | <b>FILING DATE</b><br>01/12/2001<br><b>RULE</b>                                                                   | <b>CLASS</b><br>709               | <b>GROUP ART UNIT</b><br>2152                                                                                                                                                                                                                                                   | <b>ATTORNEY DOCKET NO.</b><br>668437600004 |                                |
| <b>APPLICANTS</b><br>Stuart Berkowitz, Toronto, CANADA;<br>Liang Shen, North York, CANADA;                                                                                                                                                                                                        |                                                                                                                   |                                   |                                                                                                                                                                                                                                                                                 |                                            |                                |
| <b>** CONTINUING DATA *****</b>                                                                                                                                                                                                                                                                   |                                                                                                                   |                                   |                                                                                                                                                                                                                                                                                 |                                            |                                |
| <b>** FOREIGN APPLICATIONS *****</b>                                                                                                                                                                                                                                                              |                                                                                                                   |                                   |                                                                                                                                                                                                                                                                                 |                                            |                                |
| <b>IF REQUIRED, FOREIGN FILING LICENSE</b><br><b>GRANTED ** 02/23/2001</b>                                                                                                                                                                                                                        |                                                                                                                   |                                   |                                                                                                                                                                                                                                                                                 |                                            |                                |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met Allowance<br>Verified and Acknowledged _____<br>Examiner's Signature Initials |                                                                                                                   | <b>STATE OR COUNTRY</b><br>CANADA | <b>SHEETS DRAWING</b><br>13                                                                                                                                                                                                                                                     | <b>TOTAL CLAIMS</b><br>41                  | <b>INDEPENDENT CLAIMS</b><br>2 |
| <b>ADDRESS</b><br>Jones, Day, Reavis & Pogue<br>North Point<br>901 Lakeside Avenue<br>Cleveland, OH 44114                                                                                                                                                                                         |                                                                                                                   |                                   |                                                                                                                                                                                                                                                                                 |                                            |                                |
| <b>TITLE</b><br>Home-based client-side media computer                                                                                                                                                                                                                                             |                                                                                                                   |                                   |                                                                                                                                                                                                                                                                                 |                                            |                                |
| <b>FILING FEE RECEIVED</b><br>609                                                                                                                                                                                                                                                                 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                   | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                                            |                                |